



State of Wisconsin
Department of Workforce Development
Division of Workforce Solutions
Bureau of Migrant, Refugee and Labor Services

Updated: November 7, 2005

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**Immigrant Integration Section
Quality Assurance Review Guide
BASE DOCUMENT**

Programs: (check the refugee service program(s) that your agency administers)

<input type="checkbox"/> Social Services/ Set Aside (see App. 1)	<input type="checkbox"/> Employment & Training (including BEST) (also see App. 1)	<input type="checkbox"/> Orientation	<input type="checkbox"/> Older Refugee Program (see App 5)	<input type="checkbox"/> Batterer's Treatment	<input type="checkbox"/> Youth (see App. 2)	<input type="checkbox"/> Mental Health (see App. 3)	<input type="checkbox"/> Preventive Health
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PURPOSE: The purpose of the onsite visit by refugee services Contract Monitors and Program Managers from the Bureau of Migrant, Refugee and Labor Services (BMRLS) is two-fold: 1) to provide program development advice and gather information to refine refugee program policies and procedures; and 2) to evaluate refugee program implementation to ensure services are provided in accordance with the agency's action plan and that services comply with appropriate federal and state guidelines.

The onsite visit is one of the valuable tools that the Bureau of Migrant, Refugee and Labor Services (BMRLS) employs to evaluate program effectiveness and the factors that influence self-sufficiency outcomes.

PROCEDURES:

- 1) The BMRLS Contract Monitor contacts the Executive Director of the service provider to schedule the date(s), (to include entry and exit times) of the visit.
- 2) The Contract Monitor forwards the Quality Assurance Review Guide Base Document and the applicable Appendix for each specific program to the refugee provider at least two weeks before the onsite review. An agenda will also be forwarded, in order to alert the agency as to which program staff should be present during the onsite review.
- 3) **The refugee service agency completes Sections I, II, III, and IV of the Base Document before the scheduled onsite review date.** During the onsite review, BMRLS staff will review the QA guide with the agency to confirm our understanding of the responses.

- 4) The BMRLS Contract Monitor reviews the agency's Quarterly Program Reports and CORE expenditure reporting status to complete as much the Financial section (Section V) before the visit as possible.
- 5) During the visit, BMRLS staff (Contract Monitor, Program Manager, and other members of the review team) and refugee service provider staff will review all Sections and complete the Financial section together.
- 6) Refugee agency staff will also complete as much of the individual program Appendices for each program the agency operates before the visit. Program monitors will review active and inactive case files jointly with refugee agency staff.
- 7) Within ten days after the onsite visit, BMRLS staff (Contract Monitor) will forward a draft copy of the Quality Assurance Review report, with findings, recommendations, any corrective actions required and due dates to the refugee service agency.
- 8) The refugee service agency will have ten days to review and provide feedback to the draft report. A final copy of the report will be completed and forwarded to the agency. The Contract Monitor will track the due dates for any corrective actions that were required.

CONTRACT YEAR (enter date):

REVIEW DATE (enter date):

REFUGEE SERVICE PROVIDER (Agency Name):

I. ORGANIZATION & AGENCY STAFFING

a. Organization

- (1) Which agency is the fiscal agent for agencies in your refugee consortium?
- (2) List the other agencies in your refugee consortium
- (3) Have all the agencies signed a MOU outlining refugee services?
- (4) How often do the members of your refugee consortium meet?
- (5) List other agencies that you meet with on a recurring basis:
- (6) How does the fiscal agent review consortium services and outcomes totals?
- (7) How does the fiscal agent compile financial claims from consortium members? (e.g. subcontract auditing)

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- (8) Does your agency conduct joint staff meetings for all program staff in your agency?

Yes	No
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- (9) If yes, how often do you have joint staff meetings?

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- (10) If you do not have joint staff meetings, describe why not, and any alternate means of communicating agency priorities and information flow.

- (11) Describe how refugee program supervisors review/audit refugee case files.

I b. Organizational Chart:

- (1) Does the agency have an organization chart?

Yes	No
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- (2) If yes, attach a copy to this review guide.

II. a. Staff Summary (complete this section if there are changes to the current Action Plan).

Name of Staff/ Language(s)	Position/Title and enter FT for full-time or PT for part-time	Years with the Agency	Trained & signed confidentiality statements (Y or N)	Interpreter Training (check which training program staff attended)			
				International Institute	Bridging the Gap	Court Interpreter	Other (write in)

b. Staff Training and Development:

List training that agency staff have received in the past year to improve their skills (classes, seminars, etc.) and training that they are scheduled to attend in the coming year.

Name	Training Classes	Conferences/ Seminars	Training scheduled in the coming year

c. What is the plan to train other staff to become interpreters?

d. Personnel Policy

(1) Date current Personnel Policy adopted:

Enter date:

(2) Is there a current job description for each staff person?

Yes

No

(3) Does the Executive Director receive a personnel evaluation? (if yes, who conducts the evaluation?) Enter date

(4) Were all agency staff evaluated within the past year?

Yes	No
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e. Affirmative Action/Civil Rights/LEP Compliance Plan

(1) Does the agency have an Equal Opportunity in Employment and Service Delivery Plan?

Yes	No
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(2) If yes, enter the date the plan was adopted Enter Date

(3) If there is a plan, enter the date the plan was submitted to BMRLS Enter Date

(4) If there currently is not a plan, project the date on which the plan will be completed Enter Date

(5) Is there a Civil Rights Compliance Policy for Equal Opportunity in Employment, Service Delivery and Grievance Procedures posted in the agency?

Yes	No
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(6) If no, enter the date the compliance policy will be posted. Enter Date

(7) Has the agency appointed an EOC Coordinator?

Yes	No
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(8) Is there a Notification of Policy and Discrimination Complaint Process in agency publications?

Yes	No
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(9) Have targeted groups become members of the Board and or Committees?

Yes	No
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(10) Explain the action steps your agency has implemented in order to ensure that your LEP clients receive the appropriate language assistance. (These actions may include contracting bilingual interpreter services, hiring in-house bilingual staff , etc.)

(11) List titles of LEP Notices /handouts that your agency produced (and provide examples)

f. Board Members Present during the onsite review (if applicable)

	Name	Position/Title	Years Served

III. DEMOGRAPHICS

<i>Agency Service Area</i>			
<i>Demographics</i>	<i>County</i>	<i>County</i>	<i>County</i>
Estimated Refugee Population			
Ethnicity			
Languages			
County Unemployment Rate			
Refugees receiving FS			
Refugees receiving W2			
Refugees receiving RCA			

IV. AGENCY ADMINISTRATION

By-Laws, Personnel Policy, Affirmative Action/Civil Rights Compliance Plan:

a. By-Laws (if applicable)

(1) Date current by-laws adopted

Enter Date

- | | | | | | |
|------|--|---|--|-----|----|
| (2) | Number of people on the Board of Directors (as defined by the by-laws) | Enter
Number | | | |
| (3) | Number of refugee or former refugee Board Members | Enter
Number | | | |
| (4) | Number of non-refugee/non-former refugee Board Members | Enter
Number | | | |
| (5) | Number of refugee/former refugee women Board Members | Enter
Number | | | |
| (6) | Board meeting frequency | Number per | | | |
| (7) | Date of last general/annual election | Enter
Number | | | |
| (8) | Length of Board Members term of service | Enter
Number of
Years | | | |
| (9) | Are Board Member terms of office staggered? | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 5px;">Yes</td> <td style="text-align: center; padding: 5px;">No</td> </tr> </table> | | Yes | No |
| Yes | No | | | | |
| (10) | List the names of any Board Committees: | | | | |
| (11) | Is any member of the Board of Directors an immediate family member of the refugee service provider (MAA) staff? | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 5px;">Yes</td> <td style="text-align: center; padding: 5px;">No</td> </tr> </table> | | Yes | No |
| Yes | No | | | | |
| (12) | Are major clans or refugee groups represented on the Board? | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 5px;">Yes</td> <td style="text-align: center; padding: 5px;">No</td> </tr> </table> | | Yes | No |
| Yes | No | | | | |
| (13) | Are Board meeting minutes prepared and maintained in English? | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 5px;">Yes</td> <td style="text-align: center; padding: 5px;">No</td> </tr> </table> | | Yes | No |
| Yes | No | | | | |
| (14) | Are Board minutes forwarded to the Immigrant Integration Section Contract Monitor? | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 5px;">Yes</td> <td style="text-align: center; padding: 5px;">No</td> </tr> </table> | | Yes | No |
| Yes | No | | | | |
| (15) | Outline the training and development plan to help prepare Board Members to fulfill their duties and obligations. | | | | |

V. FINANCIAL ITEMS

(1)	Does the agency have a Cost Allocation Plan used to bill for joint administrative program costs to various funding sources? (Provide a copy of that plan) (The State's Allowable Cost Policy Manual is at: http://www.dhfs.state.wi.us/Grants/FinHandbook/introduction.htm)	Yes	No
(2)	If no, project the date the plan is expected to be completed.	Enter date	
(3)	Was the plan filed with BMRLS?	Yes	No
(4)	Does your agency have a written financial manual?	Yes	No
(5)	How often does your agency reconcile accounts to the general ledger?	Enter frequency	
(6)	When was the most recent financial audit reviewed and approved by the Wisconsin Department of Workforce Development?	Enter date	
(7)	Does the agency have an inventory record of property purchased with BMRLS funds?	Yes	No
(8)	If there is an inventory record, enter the date of the inventory and attach a copy.	Enter Date	
(9)	If an inventory has not been conducted, project the date that the inventory is expected to be completed, and forward a copy of the inventory to the BMRLS Contract Monitor.	Enter date (if applicable)	
(10)	Does the agency regularly share financial reports with the agency's Board of Directors?	Yes	No
(11)	Indicate how financial information is shared (in a verbal report during a Board meeting, or via a written report)		
(a)	Verbal (describe the type of meeting)	Yes	No
(b)	Written	Yes	No
(12)	Does the agency subcontract any portion of the refugee programs funded by BMRLS?	Yes	No

- (13) If yes, describe the agency and services subcontracted. Also attach a copy of all subcontract documents (agreement, plan, budget, etc.)
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(14) If your agency subcontracts, have you established program performance and accounting standards? (Attached a written copy of this document)	Yes	No
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(15) Is there a separate account established for non-refugee funds?	Yes	No
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(16) If a separate account is established, are there written procedures in order to conduct account transactions?	Yes	No
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Expenditure Reports (COrE)

(17) Is the agency submitting timely and accurate COrE Expenditure Reports not later than the 20 th working day of the month basis to the DWD?	Yes	No
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(18) Is a copy of the monthly COrE Report being forwarded to the BMRLS Contract Monitor?	Yes	No
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(19) Is the agency submitting COrE Reports electronically?	Yes	No
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(20) If the agency is submitting COrE Reports electronically, is a copy being forwarded (either via paper or electronic) to the Contract Monitor in the BMRLS?	Yes	No
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(21) Are the monthly COrE reports recording actual or estimated costs?	Actual	Estimated
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(22) Do the monthly COrE reports accurately reflect agency FEIN number, and is local cost share for TAG programs being reported?	Yes	No
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(23) Is your agency receiving payment from DWD in a timely manner?	Yes	No
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(24) As of the date of the onsite visit, do the costs reported in monthly COrE reports project to exceed the budget for a profile?	Yes	No
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- (25) Are program expenditures listed on the CORE Reports consistent with the Annual Action Plan and with program initiatives highlighted in the QPR's?
If not, describe:

Yes	No
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- (26) List other than refugee funding sources being used to serve refugees and former refugees:

Source	Support to which Refugee Program (elderly, E&T, etc)	Amount

VI. COMMUNITY SUPPORT & LINKAGES

- (a) Describe any written inter-agency agreements, service contracts, or partnerships with Workforce Development Boards, literacy groups, skills training organizations, business groups, schools, health departments, voluntary agencies and other community providers.

(b) Describe how you gather refugee input into the planning, delivery and evaluation of refugee services.
(c) Is there a refugee women's support group in your community? If yes, describe the activities and programs that this group provides.
(d) Describe refugee service programs (or a portion/component of) that are sub-contracted to another agency.

VII. AGENCY COMMENTS, CONCERNS & QUESTIONS (use separate sheets when necessary)

a. <i>BEST PRACTICES</i> Describe which programs, and how you deliver services, which you think your agency does well.
b. Describe agency concerns or questions

VIII. BMRLS Review team findings, corrective actions, and recommendations

(a) Findings
(1)
(2)
(3)
(4)
(5)
(b) Corrective Actions
(1)
(2)
(3)
(4)
(5)
(c) Due Dates (date corrective actions will be completed)
(1)
(2)
(3)
(4)
(5)

List BMRLS staff completing this report:

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